PTO/SB/22 (09-06)
Approved for use through 03/03/12/007 OMB 095/500801
U.S. Patient and Trademark Office, U.S. DEPARTMENT OF COMMENTOR USE OF THE OWNER OF COMMENT OF

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 249768045US	
Application Number 09/648,314-Conf. #6403		Filed	August 25, 2000
For USER-DIRECTED PRODUCT RECOMMENDATIONS			
Art Unit 2161		Examiner	E. P. Leroux
This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
Fee Small Entity Fee			
X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. X Payment by EFT Account No. SEA1PIRM. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is authorized to charge additional fees which may be required, or credit any overpayment, to Deposit Account Number 50-0665.			
l am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X attorney or agent of record. Registration Number 58,388 attorney or agent under 37 CFR 1.34.			
Registration number if activity under 37 CFR 1.34			
Signature		_Z/:	<u> </u>
J. Mason Boswell		(206) 359-8000	
Typed or printed name		Telephone Number	
NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
X Total of forms are submitted.			